

HIV Testing History Questionnaire

1. Today's date:

		/			/				
M	M		D	D		Y	Y	Y	Y

2. Date of positive HIV test to be used for this activity:

		/			/				
M	M		D	D		Y	Y	Y	Y

[Interviewer instructions are in bold and italics.]

Say: I'd like to thank you for your time today. Remember that all the information you give me will be kept private. Now I'm going to ask you a few questions about your past HIV tests.

3. When was the first time you ever tested positive for HIV? The month and year?
[We would like to know the date that the blood was drawn for the first positive HIV test.]

		/			/				
M	M		D	D		Y	Y	Y	Y

Refused = 77/77/7777, Don't know = 99/99/9999

[Compare the date in question # 2 with the date in question # 3 and write the earlier date below for MM1/YYYY1. If the dates are the same, then skip to question # 5.]

		/			/				
M	M		D	D		Y	Y	Y	Y1

4. When you first tested positive for HIV in / , was it anonymous?
 M M1 / Y Y Y Y1
 This means you did not use your name to get tested.

Code

[0] No
 [1] Yes
 [7] Refused
 [9] Don't know

5. What was the name of the place where you got your first positive HIV test (*in MM1/YYYY1*)?

[Write down site name, including state, and classify that site. Choose only one site type. "Other" response should only be used when the answer cannot be classified into one of the site types already listed.]

[1] HIV CTS
 [2] STD Clinic
 [3] Drug treatment clinic
 [4] Family planning clinic
 [5] Prenatal/OB clinic
 [6] TB clinic
 [7] Community health clinic
 [8] Prison/jail

[9] Hospital/ Private medical doctor
 [10] Blood bank
 [11] Outreach/mobile
 [12] Emergency room
 [13] Other
 [77] Refused
 [99] Don't remember

Site Code

State

- M M1 / Y Y Y Y1

[Read choices, check yes or no for each.]

- M M1 / Y Y Y Y1

☐ ₀ **No** ☐ ₁ **Yes**

- ☐
- _0
- No**
- ☐
- _1
- Yes**

- ☐
- ₀
- No**
- ☐
- ₁
- Yes**

- ☐
- ₀
- No**
- ☐
- ₁
- Yes**

- ☐
- ₀
- No**
- ☐
- ₁
- Yes**

Specify: _____

[7] Refused, [9] Don't know

- M M D D Y Y Y Y

Refused = 77/77/7777, Don't know = 99/99/9999

- | | |
|------|---|
| Code | [0] No (Skip to #9)
[1] Yes
[7] Refused (Skip to #9)
[9] Don't know (Skip to #9) |
|------|---|

- $$\overline{M} \quad \overline{M1} / \quad \overline{Y} \quad \overline{Y} \quad \overline{Y} \quad \overline{Y1}$$

M M D D Y Y Y Y

**Refused = 77/77/7777, Don't know = 99/99/9999,
Not applicable = 88/88/8888**

8b. What was the name of the place where you had your last negative HIV test?

[Write down site name, including state, and classify that site. Choose only one site type. "Other" response should only be used when the answer cannot be classified into one of the site types already listed.]

- [1] HIV CTS
- [2] STD Clinic
- [3] Drug treatment clinic
- [4] Family planning clinic
- [5] Prenatal/OB clinic
- [6] TB clinic
- [7] Community health clinic
- [8] Prison/jail

- [9] Hospital/ Private medical doctor
- [10] Blood bank
- [11] Outreach/mobile
- [12] Emergency room
- [13] Other
- [77] Refused
- [99] Don't remember

 Site Code

 State

How many times, including the first positive test, did you get tested for HIV in the 2 years before your first positive HIV test in ____/____/____, that is, since ____/____/____ ?
 M M / Y Y Y Y **[insert month and year]**

 # of times

Refused = 77, Don't know = 99

Say: The next questions are about antiretroviral HIV medicines. Sometimes one or more of these is used to try to prevent HIV infection. This is called post-exposure prophylaxis, or PEP. Some of these medicines are also used to treat Hepatitis B. These medicines can also be used in HIV treatments called HAART or the AIDS cocktail. (Show picture of medications.)

9. In the six months before your HIV test in ____/____/____ had you ever taken any of M M / Y Y Y Y these antiretroviral medicines?
(Show pictures of medications.)

 Code

- [0] No (Skip to end)
- [1] Yes
- [7] Refused (Skip to end)
- [9] Don't know

10a. Which ones? **[If not sure of time period, ask "Which medicines COULD you have taken in the past six months?"]**

10b. In the past six months, since ____/____/____ **[insert month and year]**, what was the first day on which you took any of the medicines shown in the pictures?

/

/

M M
D D
Y Y Y Y

Refused = 77/77/7777, Don't know = 99/99/9999

10c. Are you now taking any of the medicines shown in the pictures?

 Code

- [0] No
- [1] Yes (Skip to end)
- [7] Refused
- [9] Don't know

10d. When was the last day you took any of the medicines shown in the pictures?

		/			/				
<i>M</i>	<i>M</i>		<i>D</i>	<i>D</i>		<i>Y</i>	<i>Y</i>	<i>Y</i>	<i>Y</i>

Refused = 77/77/7777, Don't know = 99/99/9999

Say: Thank you for your time today.
Your answers will help us better
understand HIV testing.